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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Eric G. Lang  
 Docket: MS#150411.1/40062.86US01  
 Title: OVERLAID DISPLAY FOR ELECTRONIC DEVICES

## CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number: EL661402772US

Date of Deposit: January 31, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

By:

Name Jackie Stewart

jc841 U.S. PTO

09/773971

01/31/01

BOX PATENT APPLICATION  
 Assistant Commissioner for Patents  
 Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ Utility Patent Application: Spec. 29 pgs; 32 claims; Abstract 1 pgs.  
The fee has been calculated as shown below in the 'Claims as Filed' table.
- ☒ 13 sheets of informal drawings
- ☒ A signed Combined Declaration and Power of Attorney
- ☒ Assignment of the invention to Microsoft Corporation, Recordation Form Cover Sheet
- ☒ A check in the amount of \$1246.00 to cover the Filing Fee
- ☒ A check for \$40.00 to cover the Assignment Recording Fee.
- ☒ Return postcard

## CLAIMS AS FILED

| Number of Claims Filed              | In Excess of: | Number Extra | Rate    | Fee       |
|-------------------------------------|---------------|--------------|---------|-----------|
| <b>Basic Filing Fee</b>             |               |              |         | \$710.00  |
| <b>Total Claims</b>                 |               |              |         |           |
| 32                                  | 20            | 12           | x 18.00 | \$216.00  |
| <b>Independent Claims</b>           |               |              |         |           |
| 7                                   | 3             | 4            | x 80.00 | \$320.00  |
| <b>MULTIPLE DEPENDENT CLAIM FEE</b> |               |              |         | \$0.00    |
| <b>TOTAL FILING FEE</b>             |               |              |         | \$1246.00 |

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

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(PTO TRANSMITTAL - NEW FILING)